



**ROSS TOWNSHIP**  
**1000 Ross Municipal Drive**  
**Pittsburgh, PA 15237**  
**Phone: (412) 931-7055 Fax: (412) 931-3508**

**APPLICATION FOR SIGN ERECTION OR ALTERATION**

Property Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_ Ward: \_\_\_\_\_  
 Location of Work (space, floor, suite, etc.): \_\_\_\_\_ Parcel #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Owner's Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Installer's Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

| DESCRIPTION      | PURPOSE OF SIGN | TYPE OF SIGN          |                 |                                      |  | ELECTRICAL |
|------------------|-----------------|-----------------------|-----------------|--------------------------------------|--|------------|
| Erect [ ]        | Business ID [ ] | Wall - Flat [ ]       | Double Face [ ] | Internal Illumination [ ]            |  |            |
| Alter [ ]        | Directional [ ] | Wall - Projection [ ] | V - Type [ ]    | External Illumination [ ]            |  |            |
| Repair [ ]       | Advertising [ ] | Pole [ ]              | Canopy [ ]      | <b>(SEPARATE PERMIT IS REQUIRED)</b> |  |            |
| Painted Wall [ ] | Real Estate [ ] | Ground [ ]            | Pylon [ ]       |                                      |  |            |

  

| NO OF SIGNS                 | TYPE (WALL, GROUND, ETC) | HEIGHT | WIDTH | AREA IN SQ.FT. | PROJECTION FROM WALL            | FT. FROM STREET RIGHT-OF-WAY |
|-----------------------------|--------------------------|--------|-------|----------------|---------------------------------|------------------------------|
| 1. _____                    | _____                    | _____  | _____ | _____          | _____                           | _____                        |
| 2. _____                    | _____                    | _____  | _____ | _____          | _____                           | _____                        |
| 3. _____                    | _____                    | _____  | _____ | _____          | _____                           | _____                        |
| <b>TOTAL SQ. FT. AREA =</b> |                          |        |       | _____          | <b>ESTIMATED COST: \$</b> _____ |                              |

Building Height: \_\_\_\_\_ stories  
 Height above grade (for free standing signs only) ----- Grade to bottom of sign: \_\_\_\_\_ Grade to top of sign: \_\_\_\_\_  
 Lineal feet of frontage occupied by building: \_\_\_\_\_ feet  
 Exposed portion of wall on which sign will be displayed: \_\_\_\_\_ sq. ft.  
 Lettering on sign(s) states: \_\_\_\_\_  
 Is this application for an existing sign? Yes \_\_\_\_\_ No \_\_\_\_\_

I the undersigned owner or agent for the above referenced property, certify that all statements and data furnished with this application are true and correct.

\_\_\_\_\_  
 Signature of Applicant \_\_\_\_\_  
 Date

**DO NOT WRITE BELOW THIS LINE - TOWNSHIP USE ONLY**

( ) This application is **DISAPPROVED** FOR Zoning by: \_\_\_\_\_ Date: \_\_\_\_\_  
 ( ) Zoning Hearing Board Variance No. \_\_\_\_\_ ( ) **APPROVED** ( ) **DENIED** Date: \_\_\_\_\_  
 ( ) This application is **APPROVED** for Zoning: \_\_\_\_\_ Date: \_\_\_\_\_

**Use Reference Section No.** \_\_\_\_\_

THIS OCCUPANCY IS FOR: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

|                      |                       |                              |
|----------------------|-----------------------|------------------------------|
| Sign Permit #: _____ | Sign Permit: \$ _____ | Scanning Fee: \$ _____       |
| Occ Permit #: _____  | Occ Permit: \$ _____  | Document Storage: \$ _____   |
| Invoice #: _____     | Plan Review: \$ _____ | PA UCC Fee: \$ <b>\$4.50</b> |
| Check #: _____       |                       | <b>Grand Total: \$</b> _____ |

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
 align="center">BUILDING CODE OFFICIAL